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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)))

Attorney Docket Number		22201.046US
First Named Inventor		VOLK
COMPLETE IF KNOWN		
Application Number	10 / 159756	
Filing Date	05/29/2002	
Group Art Unit	3611	
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SUPPLEMENTAL ANIMAL EAR TAG

the specification of which

(Title of the Invention)

 is attached hereto

OR

 was filed on (MM/DD/YYYY) as United States Application Number or PCT InternationalApplication Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above:

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application	Foreign Filing Date	Priority	Certified Copy Attached? YES NO
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

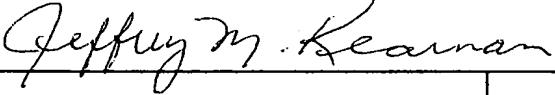
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	022870	<input type="checkbox"/> OR <input type="checkbox"/> Correspondence address below
Name TECHNOPROP COLTON LLC				
Address PO Box 567685				
Address				
City Atlanta		State GA	ZIP 31156-7685	
Country US		Telephone 770.522.9762	Fax 770.522.9763	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>				
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Daniel J.		Family Name or Surname VOLK		
Inventor's Signature				Date 8/22/02
Residence: City Alpharetta	State GA	Country US	Citizenship US	
Mailing Address 9400 Nesbit Lakes Drive				
Mailing Address				
City Alpharetta	State GA	ZIP 30022	Country US	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Jeffrey Mark		Family Name or Surname KEARNAN		
Inventor's Signature				Date 7/29/02
Residence: City Visalia	State CA	Country US	Citizenship US	
Mailing Address 6716 Hurly Avenue				
Mailing Address				
City Visalia	State CA	ZIP 93291	Country US	
<input checked="" type="checkbox"/> Additional inventors are being named on <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

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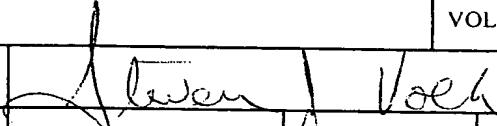
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Steven J.		VOLK		
Inventor's Signature				Date 8/25/02
Residence: City	Turlock	State CA	Country US	Citizenship US
Mailing Address	1175 Daubenberger			
Mailing Address				
City	Turlock	State CA	ZIP 95380	Country CA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Inventor's Signature				Date
Residence: City		State	Country	Citizenship
Mailing Address				
Mailing Address				
City		State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Inventor's Signature				Date
Residence: City		State	Country	Citizenship
Mailing Address				
Mailing Address				
City		State	ZIP	Country

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